# **Payroll Direct Deposit Authorization (Electronic Funds Transfer)**

### **PART 1: PERSONAL INFORMATION**

Name (last, first, middle)		Employee Number	
PART 2: ACCOUNT INFORMATION			
As a State of Michigan employee, you may elect up to four direct deposits (see page two for instructions).			
Add the following Direct Deposit	Change the following Direct Deposit Revoke the following Direct Deposit		
Name of Financial Institution	Routing Number (9 digits)  Checking or Savings		
Account Number (up to 17 characters)			
Distribution Order: 1 2 3 Default (\$) Amount or Percent to deposit			
Add the following Direct Deposit	Change the following	ng Direct Deposit Revo	ke the following Direct Deposit
Name of Financial Institution	Routing Number (9 digits)	Ch	ecking or Savings
Account Number (up to 17 characters)			
(\$)Amount orPercent			
Distribution Order: 1 2 3 Default to deposit			
Add the following Direct Deposit	Change the following	ng Direct Deposit Revo	ke the following Direct Deposit
Name of Financial Institution	Routing Number (9 digits)	Ch	ecking or Savings
Account Number (up to 17 characters)			
(\$) Amount or Percent			
Distribution Order: 1 2 3 Default to deposit			
Add the following Direct Deposit Change the following Direct Deposit Revoke the following Direct Deposit			
Name of Financial Institution	Routing Number (9 digits)	Ch	ecking or Savings
Account Number (up to 17 characters)			Carmigo
(\$) Amount or Percent			
Distribution Order: 1 2 3	Default		to deposit
PART 3: AUTHORIZATION			
I authorize the State of Michigan to deposit the net pay owed me by the State, by direct deposit (electronic funds transfer) into the			
designated financial institution(s) and Account Number(s). I understand this authorization remains in effect until revoked (cancelled)			
by: (a) me, (b) my death or legal incapacity, (c) the State of Michigan or (d) my separation.  I authorize the State of Michigan to recover money electronically deposited in my account(s) in error, either by adjusting or debiting the			
account(s), or withholding future payments. I understand I will be notified by the State of Michigan if adjustments or debits are being			
made.			
I consent to and agree to comply with the National Automated Clearing House Association Rules and Regulations and the State of Michigan's rules about electronic funds transfers as they exist on this date or as subsequently adopted, amended or repealed.			
Michigan law governs electronic funds transactions authorized by this agreement in all respects except as otherwise superseded by federal law.			
If more than one signature is required to authorize withdrawals of funds, all must sign this form before you submit it. Attach a page with secondary signatures if necessary.			
Employee Signature	Date	Employee Work Phone	Employee Home Phone
Secondary Signature	Date	Secondary Work Phone	Secondary Home Phone

## Instructions for Completing Form 3487, Payroll Direct Deposit Authorization

You can add, change, and revoke direct deposits on-line in MI HR Self-Service (www.mi.gov/selfserv); complete paper form only if you are unable to access your MI HR Self-Service account and submit the completed form to the address below.

#### PART 1: PERSONAL INFORMATION

Complete Part One by entering your last, first and middle name along with your employee number.

#### **PART 2: ACCOUNT INFORMATION**

As a state employee you may have up to four direct deposits.

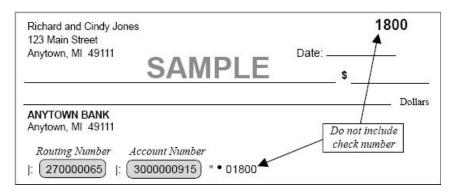
- One account **must** be designated as your *default account*. If you have only one direct deposit, that account is automatically the default account and all your net pay will be deposited to that account. The default account receives any net payment amount remaining after all other authorized deposits are made.
- If you have more than one direct deposit, you **must** indicate the dollar *amount or percentage* to be distributed to each additional account (any remaining amount or percentage is deposited in the default account).
- If you have more than one direct deposit account, you **must** indicate the *distribution order* in which deposits should be made (in case a net payment is not large enough to cover all the direct deposits you requested). If there is not sufficient remaining net pay to fulfill a direct deposit account, that account will be skipped entirely. The remaining net pay will continue to be distributed to the direct deposit accounts in the order designated.

For example, if you specify a flat amount of \$2,000 for your first account with \$500 to your second account and the balance to your default account but you only earn \$1,600 net pay, your first account will be skipped entirely, your second account will receive \$500 and the balance of \$1,100 will be deposited to your default account.

### For each direct deposit to be added, changed, or revoked:

You **must** include the financial institution ninedigit *routing number* for each account. Most banks and credit unions give their routing number (RTN) over the phone and have it posted on their web sites. If you have a checking account, the routing number (and checking account number) is on the check in the spaces indicated on the sample check pictured here.

You **must** also include a valid *account number* for each direct deposit you are adding, changing, or revoking, as well as indicate if the account is a *checking or savings* account. Account numbers are up to 17 characters (both numbers and



letters). Include hyphens but omit spaces and special symbols.

#### **PART 3: AUTHORIZATION**

Part Three must be completed before the form can be submitted. If more than one signature is required to authorize withdrawals of funds, all must sign the form before you submit it.

Please direct questions and submit the completed form to: \*

MI HR Service Center

P.O. Box 30002

Lansing, MI 48909

Toll Free: (877) 766-6447

Fax: (517) 241-5892

<sup>\*</sup> Attorney General, Secretary of State, Judicial Branch, or Legislative Branch employees should direct questions and submit the completed form to their department or agency HR Office.